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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			
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LLC REGISTERED AGENT CHANGE KENSINGTON FINANCIAL ASSOCIATES FUND I, LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

i. Na	me of the limited liability company:	V FINA	VCIAL AS	SOCIATES FUND I, LLC	
2. (a)	2875 NE 191ST ST, SUITE 603	(h	_(b) 2875 NE 191ST ST, SUITE 603		
(4-7	Principal office address of limited liability company:		M	failing address of limited liability company:	
	(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)	
	AVENTURA, FL 33180		AVENII	JRA, FL 33180	
	12/11/2017	_	M170000	010454	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	C T CORPORATION SYSTEM				
2. (a)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept_of State:		
	1200 SOUTH PINE ISLAND ROAD				
	Registered Office Address (MUST BE FLORIDA STREET)	IDDRESS	<u>l</u>		
	PLANTATIONFL	33324		. 3	
	Registered Agents Inc.			007	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	lress:	30 :		
	3030 N. Rocky Point Dr.			· · · · · · · · · · · · · · · · · · ·	
	NEW Registered Office Address.			, 2	
	STE 150A			7- UT	
	Tampa .FL	33607			
the cha agent v was/we	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis ability co f the lim	tered office mpany, it is ited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
	Ribery Park.	Rile	y Park		
-	ture of a member or authorized representative of a member			Printed or typed name of signee	
provisi the obl to mere notifice	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I is spritting of this change. Bill Havre - Preside to of Registered Agent	performa I for in C iereby co	in this capa ince of my d 'hapter 605, infirm that ti	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been	